

APPLICATION FOR POLICE SERVICE CAMPBELL COUNTY POLICE DEPARTMENT

GENERAL INSTRUCTIONS: Hand print in ink or type. Do not omit material fact, since the statements made herein are subject to verification.

NOTE: Applications not properly filled out will not be accepted. Please enclose copy of your birth certificate and copy of high school diploma or GED Certificate. Failure to comply will mean automatic rejection of your application.

	Name	First Name		Middle Na	nme		Phone Number
Pres	ent Address S	Street	City or Post Office			State	Zip Code
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Are you	ı over 21?		Social	Security	y No		
N(OTIFICATION: Li	st persons to b	e notified in c	ease of e	mergen	ICV	
		_			_	-	Phone:
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		ol.	Dates		Did Vo	n	High School Course and/or College Mai
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Understanding Language Reading Speaking Exc. Good Exc. Good Fair Exc. Good Fair Exc. Good Fair 7. SPECIAL QUALIFICATIONS AND SKILLS: A. Indicate type of special license as amateur radio operator, etc. (except vehicle operator's license.) B. Special Qualifications. (Include publications, public speaking, etc.) C. Special skills you possess and machines and equipment you can use. (For example, short wave radio, scientific or professional devices, office machines, computer skills, cameras) Number _____ D. Do you possess a valid Kentucky driver's license?_____ E. Do you have any restrictions?______ G. Do you own a car?____ 8. **WORK SCHEDULE:** A. Are you willing to work required schedule, i.e. weekends, holidays, also night or day shifts? 9. **MILITARY SERVICE:** A. If you have uncompleted military reserve obligation, what are your plans for completing it? B. Branch of Service: Rank Held _____ Type of Service____

Entry Date _____

Release Date _____

FOREIGN LANGUAGE: Enter foreign language and indicate your knowledge of each by placing "X"

Writing

6.

in proper column.

10. **EMPLOYMENT RECORD**:

List all previous employment. Start with the most recent position in block number 1 an work back to least recent position. Identify part-time job with "P.T." and temporary jobs with "Temp".

	Dates No. 1 From to to	No. 2	From	_/	to	_/			
Emplo	yed By								
Addres	s								
Phone	no.								
Salary									
Reasor	for Leaving								
Duties	Performed								
Dates	No. 3 From/ to/	Dates	No. 4 F	rom	/	_ to			
Emplo	yed By								
Addres	is .								
Phone	no.								
Salary									
Reasor	for Leaving								
Duties	Performed								
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11.	Are you willing to submit to a medical, physical,								
12.	Do you have a handicap that may prevent you for If yes, explain	perioriii	ng the	aune	s of Po	nce Oi	ncer?	res_N	0_
	ii yes, expiaiii								
13.	ACTIVITIES:								
13.	A. List organizations or groups of which you have	ve been, o	r are a	mem	her wh	ich has	a direc	t bearin	ıø
	upon your qualification for Police work.								

Yes No
1
2
3
14. Are there any other pertinent facts you would voluntarily like to present to us which in your opinion, may help us to evaluate your qualifications for the job you are seeking? If so, list these facts in the space provided below. Please remember that we are an equal employment opportunity affirmative action employer and are not interested in receiving comments which may be construed to be discriminatory in nature
A. Have you been convicted of any violation of the law including felonies, misdemeanors or traffic offenses as an adult over 18? Yes No
If yes, list below. A conviction includes any fines paid, probation served, or jail sentence. Conviction of a crime is not automatic rejection. The specific situation will be reviewed. Failure to reveal information of this question is cause for automatic rejection.
ing procedures will include written, oral, agility, medical and psychological testing. You may be asked a polygraph test.
ve read the above statement and I agree to comply with the above.
Name

DENIGEG

Name		l to you, who you know through scho	, <u> </u>
vaille		or Profession	Phone No.
		G	C'.
lame		Street Business	City
Name		or Profession	Phone No.
		Street	City
Name		Business	Di V
		or Profession	Phone No.
		Street	City
	•	presentations, omissions, or falsificated de by me above are true, complete, and ade in good faith.	<u> </u>
	I further agree and consent in the above information contain be omitted. In the event that rules and regulations. I hereb employment with the, and in	Ivance to being summarily discharge any misrepresentation or falsification memployed by this department, I authorize my former employers to gidition, to furnish any other informativerson from any and all liability for a	n or if any material information hat agree to comply with all of its order we any information regarding my on they may have concerning me.
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